

FIJIAN ELECTIONS OFFICE

59 - 63 High Street, Toorak
P. O. Box 2528, Government Buildings, Suva

Phone : 3316 225
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www.feo.org.fj

Application for Registration of Proposed Political Party Pursuant to Political Parties (Registration, Conduct, Funding & Disclosures) Act 2013

Date of Application: _____

Part A: Proposed Political Party Details

Proposed Political Party Name:

Is the Proposed Political Party an existing Political Party? Yes No

If you answered 'Yes' please state the name of the Existing Political Party:

Abbreviation/ Acronym of the Proposed Political Party Name, if any:

Proposed Party Symbol:

Details of Registered Officer:

Name: _____ **EVR Number:** _____

Postal Address: _____

Telephone: _____ **Fax:** _____

Email: _____

Part B: Details of Offices

[state details if available]

Head Office: _____

Address: _____

Postal Address: _____

Telephone: _____ **Fax :** _____

Email: _____

Website: _____

Divisional Offices

[state details if available]

Northern Division

Person in Charge: _____

Address: _____

PostalAddress: _____

Telephone: _____ **Fax:** _____

Email: _____

Eastern Division

Person in Charge: _____

Address: _____

PostalAddress: _____

Telephone: _____ **Fax :** _____

Email: _____

Northern Division

Person in Charge: _____

Address: _____

PostalAddress: _____

Telephone: _____ **Fax:** _____

Email: _____

Eastern Division

Person in Charge: _____

Address: _____

PostalAddress: _____

Telephone: _____ **Fax :** _____

Email: _____

Part C: Details of Office Holders

[Minimum of 5 Office Holders required]

Designation: _____ *[e.g.: President, Secretary, Treasurer, etc.]*

Name: _____ **EVR Number :** _____

Residential Address: _____

Phone : _____ **Email :** _____

Have you ever been declared an undischarged bankrupt? Yes No

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes No

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ *[e.g.: President, Secretary, Treasurer, etc.]*

Name: _____ **EVR Number:** _____

Residential Address: _____

Phone: _____ **Email:** _____

Have you ever been declared an undischarged bankrupt? Yes No

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes No

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ [e.g.: President, Secretary, Treasurer, etc.]

Name: _____ **EVR Number :** _____

Residential Address: _____

Phone : _____ **Email :** _____

Have you ever been declared an undischarged bankrupt? Yes No

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes No

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ [e.g.: President, Secretary, Treasurer, etc.]

Name: _____ **EVR Number:** _____

Residential Address: _____

Phone: _____ **Email:** _____

Have you ever been declared an undischarged bankrupt? Yes No

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes No

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ [e.g.: President, Secretary, Treasurer, etc.]

Name: _____ **EVR Number:** _____

Residential Address: _____

Phone: _____ **Email:** _____

Have you ever been declared an undischarged bankrupt? Yes No

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes No

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Are the Office Holders stated in this part also the Applicants? Yes No

If No, please complete Part D.

Part D: Details of Applicants

[Minimum of 5 Applicants required. If Office Holders in Part C are applicants, this part need not be completed.]

Designation: _____ *[e.g.: President, Secretary, Treasurer, etc.]*

Name: _____ **EVR Number :** _____

Residential Address: _____

Phone : _____ **Email :** _____

Have you ever been declared an undischarged bankrupt? Yes **No**

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes **No**

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ *[e.g.: President, Secretary, Treasurer, etc.]*

Name: _____ **EVR Number:** _____

Residential Address: _____

Phone: _____ **Email:** _____

Have you ever been declared an undischarged bankrupt? Yes **No**

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes **No**

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ [e.g.: President, Secretary, Treasurer, etc.]

Name: _____ **EVR Number :** _____

Residential Address: _____

Phone : _____ **Email :** _____

Have you ever been declared an undischarged bankrupt? Yes **No**

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes **No**

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ [e.g.: President, Secretary, Treasurer, etc.]

Name: _____ **EVR Number:** _____

Residential Address: _____

Phone: _____ **Email:** _____

Have you ever been declared an undischarged bankrupt? Yes **No**

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes **No**

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Designation: _____ [e.g.: President, Secretary, Treasurer, etc.]

Name: _____ **EVR Number :** _____

Residential Address: _____

Phone : _____ **Email :** _____

Have you ever been declared an undischarged bankrupt? Yes **No**

If yes, please provide full details:

Have you ever been convicted of an offence and sentenced to imprisonment for more than 6 months ('relevant conviction')? Yes **No**

If yes, please provide full details:

[Use extra sheets if additional space is required]

.....
Signed

Part E: Details of Members

1. Attach a schedule setting out the names, addresses, signatures and Voter identification Details of at least 5,000 members of Proposed Political Party from all four (4) Divisions with a minimum of members from each Division as follows:-

- | | |
|-----------------------------|-----------------------|
| a) Central Division | - 2000 members |
| b) Western Division | - 1750 members |
| c) Northern Division | - 1000 members |
| d) Eastern Division | - 250 members |

2. The list of names for each division must begin with the number 1, such that the last number in the list for each division must correspond with the number of members listed for that Division.

Part F: Undertaking

We, the Applicants, as set out in this Application form, undertake that we agree to be bound by the *Political Parties (Registration, Conduct, Funding and Disclosures) Act, 2013*['Act'], and by the *Code of Conduct for Political Parties* as set out in schedule 1 of the Act.

Signed by the Applicants:

1. **Name :** _____
 Designation : _____
 Signature : _____ **Date:** _____

2. **Name :** _____
 Designation : _____
 Signature : _____ **Date:** _____

3. **Name :** _____
 Designation : _____
 Signature : _____ **Date:** _____

4. **Name :** _____
 Designation : _____
 Signature : _____ **Date:** _____

5. **Name :** _____
 Designation : _____
 Signature : _____ **Date:** _____

Notes before you submit this Application:

1. A bank cheque payable to the Supervisor of Elections in the sum of \$5005 must accompany this Application Form. Cash payments are acceptable as well.

2. The following attachments are required:

i) Constitution of the Proposed Party

ii) List of Members under Part E of this Application

iii) Additional schedules to any part where more space/ pages were required. These pages must be properly labelled.

For official use only:

Revenue Details:

Receipt Number: _____ ***Date:*** _____

Received by: _____ ***Signature:*** _____

Paid by: _____ ***Signature:*** _____